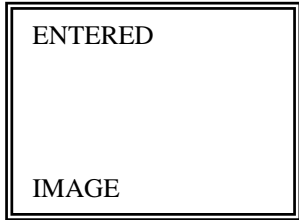


HAMILTON COUNTY MUNICIPAL COURT  
CINCINNATI, OHIO



\_\_\_\_\_  
Plaintiff

VS

CASE No. \_\_\_\_\_

\_\_\_\_\_  
Defendant

ENTRY AND REFERRAL  
TO MEDIATION

By agreement of the parties, this controversy is referred for mediation to the court's Private Complaint  
Mediation Service. This case is hereby continued to: \_\_\_\_\_

At \_\_\_\_\_ . m. for \_\_\_\_\_

in room \_\_\_\_\_ of the Hamilton County Courthouse.

\_\_\_\_\_  
Plaintiff/Attorney

Order: Notice Mailed to Parties
On: _____
Int: _____

\_\_\_\_\_  
Defendant/Attorney

Approved and Filed  
For Journalization

Date \_\_\_\_\_

\_\_\_\_\_  
Judge

\_\_\_\_\_  
Magistrate

**REFERRAL TO PRIVATE COMPLAINT MEDIATION SERVICE  
FROM MUNICIPAL CIVIL COURT**

This case is referred by Municipal Civil Court to the Private Complaint Mediation Service to give parties the opportunity to negotiate an out-of-court settlement of the dispute.

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**TO BE COMPLETED BY COURT PERSONNEL:**

Municipal Court Case # \_\_\_\_\_ Amount \_\_\_\_\_

Return to Court Date \_\_\_\_\_ Time \_\_\_\_\_ Room \_\_\_\_\_

Referred by Judge \_\_\_\_\_ Referral Date \_\_\_\_\_

**PLAINTIFF:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Plaintiff's Attorney \_\_\_\_\_ Phone \_\_\_\_\_

Attorney's Address (Street/City/State/Zip) \_\_\_\_\_

**DEFENDANT:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Defendant's Attorney \_\_\_\_\_ Phone \_\_\_\_\_

Attorney's Address (Street/City/State/Zip) \_\_\_\_\_

**Fax this form and a copy of the Entry signed by the judge to Private Complaint Mediation Service, fax # 946-3388. PCMS will schedule a mediation date and mail notification of the mediation date and time to the parties and their attorneys.**

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**TO BE COMPLETED BY PCMS STAFF**

**HEARING INFORMATION:**

Hearing Date \_\_\_\_\_ Time \_\_\_\_\_  a.m.  p.m.

Notify:  Complainant  Defendant  No One Rescheduler \_\_\_\_\_

Reschedule Date \_\_\_\_\_ Time \_\_\_\_\_  a.m.  p.m.

Notify:  Complainant  Defendant  No One Rescheduler \_\_\_\_\_

Reason for Reschedule \_\_\_\_\_